

Iowa Department of Public Health Bureau of Emergency and Trauma Services

Pilot Project Application for EMS Service Programs

In accordance with Iowa Administrative Code 641-132.3(2)c(2), an EMS medical director and service program may apply to the department for pilot project(s) on a limited basis if they wish to consider skills or procedures currently beyond an Iowa emergency medical care provider's scope of practice. The current Scope of Practice for Iowa Emergency Medical Care Providers is dated September 2019 and can be found on the department's website at https://idph.iowa.gov/BETS/EMS/provider-information

Please complete the attached Iowa EMS Pilot Project Application for all possible pilot project. Submit the completed application and supportive document to:

Rebecca Curtiss, Chief Bureau of Emergency and Trauma Service 321 East 12th Street Des Moines, Iowa 50319 rebecca.curtiss@idph.iowa.gov



Iowa EMS Pilot Project Application

Name of person completing application:
Service Program:
Service Program Medical Director:
Service Program Director:
Please provide a brief description why this Iowa EMS pilot project should be considered for a possible change in the current Iowa Emergency Medical Provider Scope of Practice:
Please provide a brief description of the $skill(s)$ or procedure(s) for consideration:
Is the skill(s) or procedure(s) submitted for consideration allowed by the current (September 2019) Iowa Emergency Medical Provider Scope of Practice?
□ Yes □ No
If "Yes" to the question above, at which level(s) of Iowa EMS provider?
☐ EMR ☐ EMT ☐ AEMT ☐ Paramedic ☐ Critical Care Paramedic
Level(s) of Iowa EMS provider(s) considered for this pilot project:
□ EMR □ EMT □ AEMT □ Paramedic □ Critical Care Paramedic
Is there evidence that the skill(s) or procedure(s) submitted for consideration is beneficial to the patient's health/condition (please provide supportive documentation/studies)?
What is the clinical evidence (please provide supportive documentation/studies) that the skill(s) or procedure(s) as used by EMS personnel will promote access to quality health care or improve patient outcome?
What is the minimum education and credentialing to ensure safe performance of the $skill(s)$ or $procedure(s)$?
Should the skill(s) or procedure(s) be included as entry-level requirement for the identified Iowa EMS provider(s) or as an optional skill or procedure based on the service program's

medical director approval?